



399794



**POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 1 - SITE INFORMATION AND ASSESSMENT**

I. IDENTIFICATION

01 STATE 02 SITE NUMBER
WI 0053686119

II. SITE NAME AND LOCATION

01 SITE NAME (Legal, common, or descriptive name of site) Red Arrow Products Co. Inc.		02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER 1226 S. Water St.			
03 CITY Manitowoc	04 STATE WI	05 ZIP CODE 54220	06 COUNTY Manitowoc	07 COUNTY CODE 071	08 CONG DIST 06
09 COORDINATES LATITUDE 44 05 30.2		LONGITUDE 087 40 26.0		Manitowoc 7.5' Quad.	
10 DIRECTIONS TO SITE (Starting from nearest public road) Take US 15/E from I-43 at Manitowoc. Take Calumet Av. to Marshall St to S 13th St. Go left (W) on S. 13th 3 blocks to S. Water St. the plant is located here.					

III. RESPONSIBLE PARTIES

01 OWNER (if known) Same		02 STREET (Business, mailing, residential)			
03 CITY	04 STATE	05 ZIP CODE	06 TELEPHONE NUMBER ()		
07 OPERATOR (if known and different from owner) Same		08 STREET (Business, mailing, residential)			
09 CITY	10 STATE	11 ZIP CODE	12 TELEPHONE NUMBER ()		
13 TYPE OF OWNERSHIP (Check one) <input checked="" type="checkbox"/> A. PRIVATE <input type="checkbox"/> B. FEDERAL _____ (Agency name) <input type="checkbox"/> C. STATE <input type="checkbox"/> D. COUNTY <input type="checkbox"/> E. MUNICIPAL <input type="checkbox"/> F. OTHER _____ (Specify) <input type="checkbox"/> G. UNKNOWN					

14 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that apply)

☒ A RCRA 3001 DATE RECEIVED 08/18/80 MONTH DAY YEAR ☐ B UNCONTROLLED WASTE SITE (CERCLA 103 c) DATE RECEIVED _____ MONTH DAY YEAR ☐ C NONE

IV. CHARACTERIZATION OF POTENTIAL HAZARD

01 ON SITE INSPECTION <input checked="" type="checkbox"/> YES DATE 08/18/80 MONTH DAY YEAR <input type="checkbox"/> NO		02 BY (Check all that apply) <input checked="" type="checkbox"/> A EPA <input type="checkbox"/> B EPA CONTRACTOR <input type="checkbox"/> C STATE <input type="checkbox"/> D OTHER CONTRACTOR <input type="checkbox"/> E LOCAL HEALTH OFFICIAL <input type="checkbox"/> F OTHER _____ (Specify) CONTRACTOR NAME(S) _____			
02 SITE STATUS (Check one) <input checked="" type="checkbox"/> A ACTIVE <input type="checkbox"/> B INACTIVE <input type="checkbox"/> C UNKNOWN		03 YEARS OF OPERATION BEGINNING YEAR _____ ENDING YEAR _____ <input checked="" type="checkbox"/> UNKNOWN			
04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED The hazardous substance of concern is the still bottoms from the recovery of Methylene Chloride (MeCl ₂).					
05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION A preliminary assessment is being done on the facility because the EPA Emergency Remedial Action team was summoned at some time in the past. No other information is available.					

V. PRIORITY ASSESSMENT

01 PRIORITY FOR INSPECTION (Check one. If high or medium is checked, complete Part 2 - Waste Information and Part 3 - Description of Hazardous Conditions and Incidents.) <input type="checkbox"/> A HIGH (Inspection required promptly) <input type="checkbox"/> B MEDIUM (Inspection required) <input type="checkbox"/> C LOW (Inspect on time available basis) <input checked="" type="checkbox"/> D NONE (No further action needed, complete current disposition form)			
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VI. INFORMATION AVAILABLE FROM

01 CONTACT Annette Weissbach		02 OF (Agency/Organization) WONR - Solid Waste, L. Mich Hdgrs		03 TELEPHONE NUMBER 414 497-3151	
04 PERSON RESPONSIBLE FOR ASSESSMENT Tom Sturm		05 AGENCY WONR	06 ORGANIZATION Solid Waste	07 TELEPHONE NUMBER 414 497-4054	08 DATE 9/29/88 MONTH DAY YEAR



<input checked="" type="checkbox"/> A TOXIC	<input type="checkbox"/> E SOLUBLE	<input type="checkbox"/> I HIGHLY VOLATILE
<input type="checkbox"/> B CORROSIVE	<input type="checkbox"/> F INFECTIOUS	<input checked="" type="checkbox"/> J EXPLOSIVE
<input type="checkbox"/> C RADIOACTIVE	<input checked="" type="checkbox"/> G FLAMMABLE	<input type="checkbox"/> K REACTIVE
<input type="checkbox"/> D PERSISTENT	<input type="checkbox"/> H IGNITABLE	<input type="checkbox"/> L INCOMPATIBLE
		<input type="checkbox"/> M NOT APPLICABLE



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER

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II. HAZARDOUS CONDITIONS AND INCIDENTS

01 ☒ A GROUNDWATER CONTAMINATION
03 POPULATION POTENTIALLY AFFECTED

02 ☐ OBSERVED (DATE _____)
04 NARRATIVE DESCRIPTION

☒ POTENTIAL ☐ ALLEGED

If a spill were to occur of large enough volume to reach the outside and seep into ground or if containment drains would fail.

01 ☒ B SURFACE WATER CONTAMINATION
03 POPULATION POTENTIALLY AFFECTED

02 ☐ OBSERVED (DATE _____)
04 NARRATIVE DESCRIPTION

☒ POTENTIAL ☐ ALLEGED

Massive spill could be uncontained and reach the Manitowoc River 500 from plant.

01 ☒ C CONTAMINATION OF AIR
03 POPULATION POTENTIALLY AFFECTED

02 ☐ OBSERVED (DATE _____)
04 NARRATIVE DESCRIPTION

☒ POTENTIAL ☐ ALLEGED

If accidental fire were to occur.

01 ☒ D FIRE/EXPLOSIVE CONDITIONS
03 POPULATION POTENTIALLY AFFECTED

02 ☐ OBSERVED (DATE _____)
04 NARRATIVE DESCRIPTION

☒ POTENTIAL ☐ ALLEGED

If accidental fire were to occur

01 ☐ E DIRECT CONTACT
03 POPULATION POTENTIALLY AFFECTED

02 ☐ OBSERVED (DATE _____)
04 NARRATIVE DESCRIPTION

☐ POTENTIAL ☐ ALLEGED

01 ☐ F CONTAMINATION OF SOIL
03 AREA POTENTIALLY AFFECTED _____
(Acres)

02 ☐ OBSERVED (DATE _____)
04 NARRATIVE DESCRIPTION

☐ POTENTIAL ☐ ALLEGED

01 ☒ G DRINKING WATER CONTAMINATION
03 POPULATION POTENTIALLY AFFECTED

02 ☐ OBSERVED (DATE _____)
04 NARRATIVE DESCRIPTION

☒ POTENTIAL ☐ ALLEGED

Slight potential. Main water intake for C. Manitowoc is located ~ 2 miles away from plant in L. Michigan. Horizontal collectors are closer but are used as standby.

01 ☐ H WORKER EXPOSURE/INJURY
03 WORKERS POTENTIALLY AFFECTED

02 ☐ OBSERVED (DATE _____)
04 NARRATIVE DESCRIPTION

☐ POTENTIAL ☐ ALLEGED

Plant has an approved contingency plan.

01 ☐ I POPULATION EXPOSURE/INJURY
03 POPULATION POTENTIALLY AFFECTED

02 ☐ OBSERVED (DATE _____)
04 NARRATIVE DESCRIPTION

☐ POTENTIAL ☐ ALLEGED



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II. HAZARDOUS CONDITIONS AND INCIDENTS (Continued)

01 ☐ J DAMAGE TO FLORA
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE _____)

☐ POTENTIAL

☐ ALLEGED

01 ☒ K DAMAGE TO FAUNA
04 NARRATIVE DESCRIPTION (include name(s) of species)

02 ☐ OBSERVED (DATE _____)

☒ POTENTIAL

☐ ALLEGED

Moxostoma valenciennesi (greater redhorse) occurs in the Manitowish R. This species is of special concern in WIS and is sensitive to chemical pollution and turbidity.

01 ☒ L CONTAMINATION OF FOOD CHAIN
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE _____)

☒ POTENTIAL

☐ ALLEGED

01 ☐ M UNSTABLE CONTAINMENT OF WASTES
(Spills/runoff/standing liquids/leaking drums)

02 ☐ OBSERVED (DATE _____)

☐ POTENTIAL

☐ ALLEGED

03 POPULATION POTENTIALLY AFFECTED _____

04 NARRATIVE DESCRIPTION

Review of files indicate hazardous wastes are properly managed.

01 ☐ N DAMAGE TO OFFSITE PROPERTY
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE _____)

☐ POTENTIAL

☐ ALLEGED

01 ☐ O CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE _____)

☐ POTENTIAL

☐ ALLEGED

01 ☐ P ILLEGAL/UNAUTHORIZED DUMPING
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE _____)

☐ POTENTIAL

☐ ALLEGED

05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS

III. TOTAL POPULATION POTENTIALLY AFFECTED: _____

IV. COMMENTS

PA not truly representative of the situation without further information on EPA's response.

V. SOURCES OF INFORMATION (Cite specific references, e.g. state files, sample analysis reports)

Red Arrow Products Inc., Hazardous waste guide; Memo 6-26-88 from Endangered Resource Section of WDNR; Red Arrow files, Lake Michigan Advers, Green Bay.

PA NARRATIVE

OCT 8 1988

BUREAU OF SOLID -
HAZARDOUS WASTE MANAGEMENT

SITE NAME: Red Arrow Products Inc.

CERCLIS #: WID0536866119

SITE LOCATION: NE1/4, NE1/4, Sec. 30, T19N, R17E; Manitowoc County; 1226 S. Water St., Manitowoc, WI.

SITE DESCRIPTION: The facility uses methylene chloride (MeCl_2) as part of its process to manufacture smoke flavoring. The MeCl_2 is then distilled for reuse. The still bottoms constitute the hazardous waste which consists of 0-30% MeCl_2 and 70-100% wood tar residue.

Apparently an incident occurred at the plant that required the EPA emergency remedial action team to respond. The author has been unable to obtain information to further elaborate on the incident. However a Preliminary Assessment is required in these situations.

SITE CHARACTERISTICS: The plant is located in the City of Manitowoc on the Manitowoc River approximately 3000 feet from its mouth into Lake Michigan. The primary water intakes for the city are located about 2.2 miles from the site in the lake with the backup intakes (ranney wells) located about 1.5 miles.

The general geology of the area consists of 100 feet of unconsolidated glacial deposits over the Niagara Dolomite which may be up to 400 feet thick. Underlying the dolomite is the Maquoketa Shale, which may be up to 300 feet thick. Beneath the shale is the Galena Dolomite at about 800 feet.

The Niagara Dolomite is the primary source of water for the private wells of the area as well as the nearby municipalities. The unconsolidated materials as well as the shale yield only small amounts of water. The nearest private well is at least 1 mile from the site.

COMMENTS: The plant operates under an approved contingency plan as required under NR 181.42 (4).

PRIORITY FOR INSPECTION: NFRAP

PREPARED BY: Tom Sturm, Sept 29, 1988.

Sources of Information

- Red Arrow Hazardous Waste Guide; DNR Lake Michigan Hdqrs.
- Water Supply files, City of Manitowoc, WDNR LMH.
- Well log, Village of Mishicot; DNR Water Supply files.
- Water Supply Data Book, 1985; WDNR
- USGS Hydrologic Atlas, Lake Michigan Basin, Wisconsin.